



Your business  
is our business.

REDACTED FOR PUBLIC INSPECTION

7852 Walker Drive, Suite 200  
Greenbelt, Maryland 20770  
phone: 301-459-7590, fax: 301-577-5575  
internet: [www.jsitel.com](http://www.jsitel.com), e-mail: [jsi@jsitel.com](mailto:jsi@jsitel.com)

June 30, 2017

**Via Hand Delivery**

Marlene H. Dortch, Secretary  
Federal Communications Commission  
Office of the Secretary  
445 12<sup>th</sup> Street, SW  
Washington, DC 20554

**Re: WC Docket No. 14-58  
2017 ETC Annual Report of Bruce Telephone Company, Inc.  
Study Area Code 280447**

Dear Ms. Dortch:

On behalf of Bruce Telephone Company, Inc. ("Company"), JSI files the attached confidential version of the FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission's rules.<sup>1</sup> Company seeks confidential treatment under Protective Order for section 54.313(f)(2) financial information.<sup>2</sup> The redacted version is being filed this date via the FCC's Electronic Comment Filing System.

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall  
JSI Vice President  
301-459-7590  
[jkuykendall@jsitel.com](mailto:jkuykendall@jsitel.com)

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<sup>1</sup> 47 C.F.R. §§ 54.313, 54.422.

<sup>2</sup> *Connect America Fund et al.*, WC Docket Nos. 10-90 and 14-58, Protective Order, DA 16-296 rel. March 22, 2016 (Protective Order). 47 C.F.R. § 54.313(f)(2).

**FCC Form 481 - Carrier Annual Reporting  
Data Collection Form****REDACTED FOR PUBLIC INSPECTION**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<010>	Study Area Code	280447
<015>	Study Area Name	BRUCE TEL CO - MS
<020>	Program Year	2018
<030>	Contact Name: Person USAC should contact with questions about this data	Rick Bennett
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6017643463 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	rbennett@nexband.com
	Form Type	54.313 and 54.422



<b>(300) Unfulfilled Service Request</b> <b>Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	280447
<015>	Study Area Name	BRUCE TEL CO - MS
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Rick Bennett
<035>	Contact Telephone Number - Number of person identified in data line <030>	6017643463 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

<300> Unfulfilled service request (voice)	<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;">0</div>
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<310> Detail on attempts (voice)	<div style="border-bottom: 1px solid black; width: 100%;"></div> Name of Attached Document
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<320> Unfulfilled service request (broadband)	<div style="border: 1px solid black; width: 200px; height: 20px; margin: 0 auto;">0</div>
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<330> Detail on attempts (broadband)	<div style="border-bottom: 1px solid black; width: 100%;"></div> Name of Attached Document
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(400) Number of Complaints per 1,000 customers Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	280447
<015>	Study Area Name	BRUCE TEL CO - MS
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Rick Bennett
<035>	Contact Telephone Number - Number of person identified in data line <030>	6017643463 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize. Offered only fixed voice	
<410>	Complaints per 1000 customers for fixed voice	0 . 0
<420>	Complaints per 1000 customers for mobile voice	
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize. Offered only fixed broadband	
<440>	Complaints per 1000 customers for fixed broadband	0 . 0
<450>	Complaints per 1000 customers for mobile broadband	

(500) Compliance With Service Quality Standards and Consumer Protection Rules Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	280447
<015>	Study Area Name	BRUCE TEL CO - MS
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Rick Bennett
<035>	Contact Telephone Number - Number of person identified in data line <030>	6017643463 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com
<500>	Certify compliance with applicable service quality standards and consumer protection rules	Yes
280447ms510 . pdf		
<510>	Descriptive document for Service Quality Standards & Consumer Protection Rules Compliance	
<515>	Certify compliance with applicable minimum service standards	

<b>(600) Functionality in Emergency Situations Data Collection Form</b>	<b>REDACTED FOR PUBLIC INSPECTION</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	280447
<015>	Study Area Name	BRUCE TEL CO - MS
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Rick Bennett
<035>	Contact Telephone Number - Number of person identified in data line <030>	6017643463 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	280447ms610.pdf





REDACTED FOR PUBLIC INSPECTION

<b>(710) Broadband Price Offerings</b> <b>Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	280447
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<020>	Program Year	2018
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<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

[illegible]



**(900) Tribal Lands Reporting  
Data Collection Form**

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<010>	Study Area Code	280447
<015>	Study Area Name	BRUCE TEL CO - MS
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Rick Bennett
<035>	Contact Telephone Number - Number of person identified in data line <030>	6017643463 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

<900> Does the filing entity offer tribal land services? (Y/N) No

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select Yes or No or Not Applicable

**(1000) Voice and Broadband Service Rate Comparability  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	280447
<015>	Study Area Name	BRUCE TEL CO - MS
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Rick Bennett
<035>	Contact Telephone Number - Number of person identified in data line <030>	6017643463 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

<1000> Voice services rate comparability certification Yes

<1010> Attach detailed description for voice services rate comparability compliance

\_\_\_\_\_  
Name of Attached Document

<1020> Broadband comparability certification

Yes - Pricing is no more than the most recent applicable benchmark announced by the Wireline Competition Bureau

<1030> Attach detailed description for broadband comparability compliance

\_\_\_\_\_  
Name of Attached Document

**(1100) No Terrestrial Backhaul Reporting  
Data Collection Form**

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

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<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Rick Bennett
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<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

<1100> Certify whether terrestrial backhaul options exist (Y/N)

Yes

<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).

**(1200) Terms and Condition for Lifeline Customers**  
**Lifeline**  
**Data Collection Form**

FCC Form 481  
 OMB Control No. 3060-0986/OMB Control No. 3060-0819  
 July 2013

<010>	Study Area Code	280447
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<030>	Contact Name - Person USAC should contact regarding this data	Rick Bennett
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<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

280447ms1210.pdf

Name of Attached Document

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

<1220> Link to Public Website

HTTP

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

<1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒

<1222> Details on the number of minutes provided as part of the plan, ☒

<1223> Additional charges for toll calls, and rates for each such plan. ☒

<b>(2005) Price Cap Carrier Additional Documentation</b> <b>Data Collection Form</b> <i>Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers</i>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<b>&lt;010&gt;</b>	Study Area Code	280447
<b>&lt;015&gt;</b>	Study Area Name	BRUCE TEL CO - MS
<b>&lt;020&gt;</b>	Program Year	2018
<b>&lt;030&gt;</b>	Contact Name - Person USAC should contact regarding this data	Rick Bennett
<b>&lt;035&gt;</b>	Contact Telephone Number - Number of person identified in data line <030>	6017643463 ext.
<b>&lt;039&gt;</b>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

### Incremental Connect America Phase I reporting

<b>&lt;2011&gt;</b> 3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>	
<b>&lt;2022&gt;</b> Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only.	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>	
<b>&lt;2023&gt;</b> The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only.	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>	
<b>&lt;2024A&gt;</b> Round 2 Recipient of Incremental Support?	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>	<div style="border: 1px solid black; width: 100%; height: 60px; margin: 0 auto;"></div>
<b>&lt;2024B&gt;</b> Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.	Name of Attached Document Listing Required Information	
<b>&lt;2025A&gt;</b> Round 2 Recipient of Incremental Support?	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>	<div style="border: 1px solid black; width: 100%; height: 60px; margin: 0 auto;"></div>
<b>&lt;2025B&gt;</b> Attach geocoded Information for Phase I milestone reports (Round 2 for year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).	Name of Attached Document Listing Required Information	
<b>&lt;2015&gt;</b> 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>	

**(2005) Price Cap Carrier Additional Documentation**

**Data Collection Form**

*Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers*

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

**Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}**

<2016> Certification support used to build broadband

**Connect America Phase II Reporting {47 CFR § 54.313(e)}**

<2017A> Connect America Fund Phase II recipient?

<2017C> Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.

<2018> Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)

Name of Attached Document Listing  
Required Information

<2019> Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)



(3005) Rate Of Return Carrier Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	280447
<015>	Study Area Name	BRUCE TEL CO - MS
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Rick Bennett
<035>	Contact Telephone Number - Number of person identified in data line <030>	6017643463 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)	Yes - Attach Certification	
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}		280447ms3010.pdf
(3010B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	Yes - Attach New Community Anchors	
(3012B)	Please Provide Attachment	Name of Attached Document Listing Required Information	280447ms3012.xlsm
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	<input checked="" type="radio"/> <input type="radio"/>
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	<input checked="" type="radio"/> <input type="radio"/>
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		<input checked="" type="checkbox"/>
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		<input checked="" type="checkbox"/>
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	280447ms3017.pdf
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No)	<input type="radio"/> <input type="radio"/>
(3019)	If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or		<input type="checkbox"/>
(3020)	(2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		<input type="checkbox"/>
(3021)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3022)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		<input type="checkbox"/>
(3023)	Underlying information subjected to a review by an independent certified public accountant		<input type="checkbox"/>
(3024)	Underlying information subjected to an officer certification.		<input type="checkbox"/>
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	

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**(3005) Rate Of Return Carrier Additional Documentation (Continued)**

FCC Form 481

**Data Collection Form**

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

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<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

**Financial Data Summary**

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

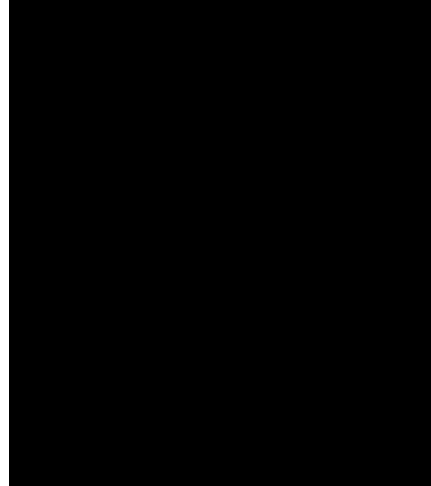
(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



<b>(4005) Rural Broadband Experiment Additional Documentation</b> <b>Data Collection Form</b>	<b>FCC Form 481</b> <b>OMB Control No. 3060-0986/OMB Control No. 3060-0819</b> <b>July 2013</b>
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<010>	Study Area Code	280447
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<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission’s public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Community Anchor Institutions – FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information	
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Broadband Deployment Locations – FCC 14-98 (paragraph 80)

4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.	Name of Attached Document Listing Required Information	
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4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband speed and data usage allowances available in the relevant geographic area.	Name of Attached Document Listing Required Information	
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<b>Certification - Reporting Carrier Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	280447
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<035>	Contact Telephone Number - Number of person identified in data line <030>	6017643463 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

**TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:**

<b>Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients</b>	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

<b>Certification - Agent / Carrier</b> <b>Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	280447
<015> Study Area Name	BRUCE TEL CO - MS
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<030> Contact Name - Person USAC should contact regarding this data	Rick Bennett
<035> Contact Telephone Number - Number of person identified in data line <030>	6017643463 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:**

<b>Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier</b>	
I certify that (Name of Agent) <u>John Staurulakis, Inc.</u> is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	John Staurulakis, Inc.
Name of Reporting Carrier:	BRUCE TEL CO - MS
Signature of Authorized Officer:	CERTIFIED ONLINE Date: 06/29/2017
Printed name of Authorized Officer:	Stephanie Hand
Title or position of Authorized Officer:	CFO
Telephone number of Authorized Officer:	6017643463 ext.8080
Study Area Code of Reporting Carrier:	280447 Filing Due Date for this form: 07/03/2017
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

**TO BE COMPLETED BY THE AUTHORIZED AGENT:**

<b>Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier</b>	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	BRUCE TEL CO - MS
Name of Authorized Agent Firm:	John Staurulakis, Inc.
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE Date: 06/29/2017
Name of Authorized Agent Employee:	Lans Chase
Title or position of Authorized Agent or Employee of Agent	Staff Director - Regulatory
Telephone number of Authorized Agent or Employee of Agent:	7705692015 ext.1
Study Area Code of Reporting Carrier:	280447 Filing Due Date for this form: 07/03/2017
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

## Attachments

**Demonstration of Complying with Applicable Service Quality Standards and  
Consumer Protection Rules For Voice and Broadband**

In establishing this certification in its *2005 ETC Order*,<sup>1</sup> the FCC found that an ETC must make “a specific commitment to objective measures to protect consumers.”<sup>2</sup> The FCC found that for wireless ETCs, compliance with CTIA’s Consumer Code for Wireless Service would satisfy this requirement” and that the sufficiency of other commitments would be considered on a case-by-case basis.<sup>3</sup> In this context, the FCC stated, “to the extent a wireline or wireless ETC applicant is subject to consumer protection obligations under state law, compliance with such laws may meet our requirement.”<sup>4</sup>

Bruce Telephone Company, Inc. (“Company”) hereby certifies that it is complying with applicable service quality standards and consumer protection rules. The Company is subject to consumer protection obligations under state law and pursuant to the orders in Mississippi Public Service Commission Docket No. 2005-AD-662. These obligations include, but are not limited to, the following: (1) filing a Local Exchange Tariff pursuant to the requirements of Mississippi Public Service Commission which disclose rates, terms and conditions of service to customers; (2) adherence to state consumer protection requirements governing telephone providers under Title 39 Utilities, Part III Rules and Regulations Governing Public Utility Service , Subpart 1, General Rules, and Subpart 3, Special Rules – Telephone Companies, including requirements for customer

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<sup>1</sup> *Federal-State Joint Board on Universal Service*, CC Docket No. 96-45, Report and Order, FCC 05-46 (rel. Mar. 17, 2005) (“*2005 ETC Order*”).

<sup>2</sup> *Id.* at para. 28.

<sup>3</sup> *Id.* The FCC noted that under the CTIA Consumer Code, wireless carriers agree to: “(1) disclose rates and terms of service to customers; (2) make available maps showing where service is generally available; (3) provide contract terms to customers and confirm changes in service; (4) allow a trial period for new service; (5) provide specific disclosures in advertising; (6) separately identify carrier charges from taxes on billing statements; (7) provide customers the right to terminate service for changes to contract terms; (8) provide ready access to customer service; (9) promptly respond to consumer inquiries and complaints received from government agencies; and (10) abide by policies for protection of consumer privacy.” *Id.* at n. 71.

<sup>4</sup> *Id.* at n. 72.

service, billing, consumer complaints, rates and charges, and under Miss. Code Ann. Title 77, Chapter 3 statutes; and (3) truth-in-billing requirements; and (4) CPNI, Red Flag Rules and other applicable federal and state requirements governing the protection of customers' privacy.

Company is subject to consumer protection obligations for broadband services under federal law. These obligations include, but are not limited to, the following: public disclosure of accurate information regarding network management practices, performance, and commercial terms of broadband internet access services; as a means of providing sufficient information for consumers to make informed choices regarding use of such services, and for content, application, service and device providers to develop, market, and maintain internet offerings as specified in F.C.C. 47 C.F.R. Part 8 §8.3. The Company furthermore will comply with all requirements set forth in the *2015 Open Internet Order*.



**Demonstration of Ability to Function in Emergency Situations for Voice and Broadband Services**

Bruce Telephone Company, Inc. ("Company") hereby certifies that it is able to function in emergency situations as set forth in §54.202(a)(2)<sup>1</sup> and pursuant to orders in Mississippi Public Service Commission Docket No. 2005-AD-662. The Company's network is designed to remain functional in emergency situations without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations as required by Section 54.202(a)(2). The Company can reroute traffic around damaged facilities. Changing call routing translations will also allow the Company to manage traffic spikes throughout its network, as emergency situations require.

Specifically, each central office building is supplied with standby generators and battery back-up that enable the central office to keep running until power is restored so long as fuel is available, or until system changes are made to reroute traffic. The Company has battery backup at all office locations and in its electronic equipment sites. Length of run time is determined by the equipment serving the area and the number of customers working out of the equipment. The company's standby generators and battery back-up support both voice and broadband network equipment should an emergency situation occur. The company's standby generators and battery back-up support both voice and broadband network equipment should an emergency situation occur.

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<sup>1</sup> Section 54.202(a)(2) requires ETCs that are designated by the Commission to "demonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations."

REDACTED FOR PUBLIC INSPECTION

**(700) Price Offerings including Voice Rate Data  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	280447
<015>	Study Area Name	BRUCE TEL CO - MS
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Rick Bennett
<035>	Contact Telephone Number - Number of person identified in data line <030>	6017643463 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

<701> Residential Local Service Charge Effective Date

1/1/2017

<702> Single State-wide Residential Local Service Charge

<703>

[illegible]

REDACTED FOR PUBLIC INSPECTION

<b>(710) Broadband Price Offerings</b> <b>Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	280447
<015>	Study Area Name	BRUCE TEL CO - MS
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Rick Bennett
<035>	Contact Telephone Number - Number of person identified in data line <030>	6017643463 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

[illegible]

REDACTED FOR PUBLIC INSPECTION

<b>(800) Operating Companies</b>	FCC Form 481
<b>Data Collection Form</b>	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	280447
<015>	Study Area Name	BRUCE TEL CO - MS
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Rick Bennett
<035>	Contact Telephone Number - Number of person identified in data line <030>	6017643463 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rbennett@nexband.com

<810>	Reporting Carrier	Bruce Telephone Company, Inc.
<811>	Holding Company	Fail Telecommunication Corporation
<812>	Operating Company	Bruce Telephone Company, Inc.

[illegible]

**SERVICE CONNECTION CHARGES****LOW-INCOME ASSISTANCE PROGRAM****GENERAL**

The Company, as part of its obligations as an Eligible Telecommunications Carrier, offers a low-income assistance program. This program, Lifeline Assistance, is offered under the terms and conditions provided below:

**Lifeline Assistance****A. General**

Lifeline Assistance is a retail service offering available to qualifying low-income subscribers as provided for below. Lifeline Assistance enables eligible subscribers to pay reduced charges for the following package services: voice-grade access to the public switched network; local usage; dual-tone multi-frequency signaling or its functional equivalent; single-party service; access to emergency services; access to operator services; access to interexchange service; access to directory assistance; and toll blocking. An eligible customer receives credit for the Low-Income Assistance Program pursuant to FCC Order 12-11 and MPSC Docket 2007-AD-487.

**B. Regulations**

1. A consumer household is eligible for Lifeline Assistance if the total household income is at or below 135% of the Federal Poverty Guidelines. Lifeline Assistance is also available to households containing at least one household member who participates in at least one of the following programs:

- a. Medicaid
- b. Supplemental Nutrition Assistance Program (SNAP), formerly "Food Stamps"
- c. Supplemental Security Income (SSI)
- d. Veterans Pension and Survivors Benefits
- e. Section 8 Federal Public Housing Assistance (FPHA)

(N)

2. Each subscriber to Lifeline Assistance must certify in writing to the Company, under penalty of perjury, that he/she receives benefits under a program outlined in subparagraph B.1., above, or meets the income-based criteria, and must, on the same document, agree to notify the Company if he/she ceases to participate in the qualifying program. The certification form shall conform to the requirements described herein, and shall be made available upon request to any subscriber. The Company shall retain all such subscriber certifications pursuant to FCC Order 12-11 in order to furnish proof of subscriber eligibility as may be required from time to time by Universal Service administrators.

**FILED**

NOV 28 2016

**MISS. PUBLIC SERVICE  
COMMISSION  
PUBLIC UTILITIES STAFF****APPROVED**

DEC 01 2016

**MISS. PUBLIC SERVICE  
COMMISSION  
PUBLIC UTILITIES STAFF**

ISSUED: November 23, 2016

EFFECTIVE: December 1, 2016

BY: Christa Alexander, Vice President of Operations

**16-UN-0240**

**BRUCE TELEPHONE COMPANY, INC.**  
TC-003-0014-00

Section 4  
Third Revision Sheet 16.1  
Cancels Second Revision Sheet 16.1

**SERVICE CONNECTION CHARGES**

**LOW-INCOME ASSISTANCE PROGRAM**

Lifeline Assistance (continued)

**B. Regulations (continued)**

3. All applications for this service are subject to verifications with the state agency responsible for administration of the qualifying program. The Company may request any additional documentation deemed necessary prior to providing Lifeline benefits such as an administrating agency's official designation of eligibility in a particular means-based program found in sub-paragraph B.1.,above, and that the telephone subscriber is the financially responsible party for the qualifying member of his or her household, or that the eligible household member is the telephone subscriber's dependent pursuant to the rules and regulations of the Internal Revenue Service. (T)

4. A subscriber may elect at the time of subscription to Lifeline Assistance to receive toll blocking as part of Lifeline Assistance. "Toll blocking" is a service that permits a subscriber to elect not to allow the completion of outgoing toll calls from the subscriber's residence. (T)  
(D)

5. Lifeline Assistance will not be disconnected for non-payment of toll charges, however, in the event toll charges are not paid within 10 days of the mailing of the Company bill, the Company will implement toll blocking immediately thereafter. In addition, the Company will not deny re-establishment of local service to customers who are eligible for Lifeline Assistance and have previously been disconnected for non-payment of toll charges. Lifeline Assistance will not be connected if an outstanding balance is owed by the customer for local service. (D) (T)

6. The Company may not collect a service deposit in order to initiate Lifeline Assistance if the qualifying low-income subscriber voluntarily elects toll blocking from the Company, where available. (D)

**NOTES:**

- a. Sub-paragraph B.4. has been moved from sub-paragraph B.6. of this Sheet.
- b. Sub-paragraph B.5. has been moved from sub-paragraph B.7. Sheet 16.1-A.
- c. Sub-paragraph B.6. has been moved from sub-paragraph B.8. Sheet 16.1-A.
- d. Original Sheet sub-paragraph B.5. has been deleted per FCC Order 12-11.

**FILED**

MAY 25 2012

MISS. PUBLIC SERVICE  
COMMISSION  
PUBLIC UTILITIES STAFF

**12-UN-0193**

**APPROVED**

JUL 01 2012

MISS. PUBLIC SERVICE  
COMMISSION  
PUBLIC UTILITIES STAFF

ISSUED: May 23, 2012

EFFECTIVE: July 1, 2012

BY: Charles F. Fail, President

**BRUCE TELEPHONE COMPANY, INC.**  
**TC-003-0014-00**

**Section 4**  
**First Revision Sheet 16.1-A**  
**Cancels Original Sheet 16.1-A**

**SERVICE CONNECTION CHARGES**

**LOW-INCOME ASSISTANCE PROGRAM**

**Lifeline Assistance (continued)**

**B. Regulations (continued)**

7. The Company will reconcile and confirm all subscribers' eligibility annually pursuant to FCC Order 12-11 by requiring each Lifeline subscriber to respond to and provide proof of continuing program eligibility under penalty or perjury via a FCC-compliant survey that their household continues to meet program eligibility requirements specified in B.1., above. Lifeline subscribers who are determined to be ineligible shall be notified of their ineligibility in writing by the Company and provided 30 days from the date of such notice to rectify or otherwise demonstrate their eligibility prior to the discontinuance of their Lifeline benefits. All unresolved disputes regarding Lifeline eligibility shall be brought to the attention of the MPSC for resolution.

(T)

(T)

8. Only one Lifeline service is available per residential household pursuant to FCC Order 12-11. A household is any individual or group of individuals who are living together at the same address as one economic unit. A household may include related and unrelated persons. An "economic unit" consists of all adult individuals contributing to and sharing in the income and expenses of a household. An adult is any person eighteen years or older. When an adult having no or minimal income and living with someone who provides financial support to him or her, both people shall be considered part of the same household. Children under the age of eighteen living with their parents or guardians are considered to be part of the same household as their parents or guardians. A household is not permitted to receive Lifeline benefits from multiple providers.

(N)

(N)

9. A Lifeline customer may subscribe to any local service offering available to other residential customers.

(D) (T)

10. The PIC charge will not be billed to Lifeline customers who subscribe to toll blocking and do not presubscribe to a long distance carrier.

(D) (T)

**NOTES:**

- a. Sub-paragraph B.7. has been moved from sub-paragraph B.4. of Sheet 16.1.
- b. Original Sheet sub-paragraph B.7. has been moved to B.5. of Sheet 16.1-A.
- c. Original Sheet sub-paragraph B.9. and B.10. have been deleted per FCC Order 12-11.
- d. Sub-paragraphs B.9 and B.10. have been moved from sub-paragraph B.11. and B.12., respectively, of this Sheet.

**FILED**

**APPROVED**

**MAY 25 2012**

**JUL 01 2012**

**MISS. PUBLIC SERVICE  
 COMMISSION**

**MISS. PUBLIC SERVICE  
 COMMISSION**

**ISSUED: May 23, 2012**

**PUBLIC UTILITIES STAFF**

**PUBLIC UTILITIES STAFF  
 EFFECTIVE: July 1, 2012**

**BY: Charles F. Fall, President**

**12-UN-0193**

BRUCE TELEPHONE COMPANY, INC.  
TC-003-0014-00

Section 4  
Fourth Revision Sheet 16.2  
Cancels Third Revision of Sheet 16.2

**SERVICE CONNECTION CHARGES**

**LOW-INCOME ASSISTANCE PROGRAM**

Lifeline Assistance (continued)

B. Regulations (continued)

11. Lifeline subscribers may not seek to receive benefits if they have enrolled with another service provider for Voice Access Telecommunication services within the last 60 days. (N)

C. Credits

1. The following credits will apply for each customer eligible for Lifeline Assistance.

Lifeline Credit	Monthly Credit
	\$9.25

2.

3. Partial payments that are received from Lifeline customers shall first be applied to local service charges and then to any outstanding toll charges.

**FILED**

NOV 28 2016

MISS. PUBLIC SERVICE  
COMMISSION  
PUBLIC UTILITIES STAFF

**APPROVED**

DEC 01 2016

MISS. PUBLIC SERVICE  
COMMISSION  
PUBLIC UTILITIES STAFF

ISSUED: November 23, 2016

EFFECTIVE: December 1, 2016

BY: Christa Alexander, Vice President of Operations

**16-UN-0240**



**GENERAL EXCHANGE TARIFF**

**BRUCE TELEPHONE COMPANY, INC.**  
TC-003-0014-00

Section 4  
Fourth Revision Sheet 16.3  
Cancels Third Revision of Sheet 16.3

**SERVICE CONNECTION CHARGES**

**LOW-INCOME ASSISTANCE PROGRAMS**

Link-Up

(D)

*The Link-Up Assistance Program for non-tribal lands has been discontinued pursuant to FCC Order 12-11.*

THIS PAGE RESERVED FOR FUTURE USE.

(N)

**FILED**

MAY 25 2012

MISS. PUBLIC SERVICE  
COMMISSION  
PUBLIC UTILITIES STAFF

**12-UN-0193**

**APPROVED**

JUL 01 2012

MISS. PUBLIC SERVICE  
COMMISSION  
PUBLIC UTILITIES STAFF

ISSUED: May 23, 2012

EFFECTIVE: July 1, 2012

BY: Charles F. Fail, President

**GENERAL EXCHANGE TARIFF**

**BRUCE TELEPHONE COMPANY, INC.**  
TC-003-0014-00

Section 4  
Third Revision Sheet 16.4  
Cancels Second Revision of Sheet 16.4

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**SERVICE CONNECTION CHARGES**

**LOW-INCOME ASSISTANCE PROGRAMS**

Link-Up

*The Link-Up Assistance Program for non-tribal lands has been discontinued pursuant to FCC (D) Order 12-11.*

THIS PAGE RESERVED FOR FUTURE USE.

(N)

**FILED**

MAY 25 2012

MISS. PUBLIC SERVICE  
COMMISSION  
PUBLIC UTILITIES STAFF

ISSUED: May 23, 2012

BY: Charles F. Fail, President

**APPROVED**

JUL 01 2012

MISS. PUBLIC SERVICE  
COMMISSION  
PUBLIC UTILITIES STAFF

EFFECTIVE: July 1, 2012

**12-UN-0193**

REDACTED FOR PUBLIC INSPECTION  
GENERAL EXCHANGE TARIFF

BRUCE TELEPHONE COMPANY, INC.  
All Exchanges in Certificated Area  
TC-003-0014-00

SECTION 2  
8th Revised Sheet 1  
Cancels 7th Revised Sheet 1

LOCAL EXCHANGE SERVICE TARIFF

GENERAL

This tariff is governed, except as otherwise specified herein, by the General Exchange Tariff which is hereby made part of this tariff. The charges quoted in this tariff are for a period of one month, payable monthly in advance, and entitle the subscriber to local exchange service and Extended Area Service to Calhoun City, Houlka, Slate Springs, and Vardaman, Mississippi, at the rates shown below.

RATES

RESIDENCE

One party line access

Tel-Touch

\$ 19.63

(1)

Non Tel-Touch

\$ 18.41<sup>1</sup>

(1)

BUSINESS

One Party Line Access without hunting

Tel-Touch

\$ 28.12

(1)

Non Tel-Touch

\$ 27.06<sup>1</sup>

(1)

One Party Access with hunting

Tel-Touch

\$ 40.06

TRUNKS

Combination (Two-way), per trunk

Tel-Touch

\$ 40.06

Inward Only

Tel-Touch

\$ 40.06

Outward Only

Tel-Touch

\$ 40.06

1. Non Tel-Touch (rotary) service is available only to existing Non Tel-Touch subscribers as of November 1, 2010. All new and changed services of the type listed on this sheet will require Tel-Touch service.

**FILED**

SEP 19 2016

MISS. PUBLIC SERVICE  
COMMISSION  
PUBLIC UTILITIES STAFF

**APPROVED**

NOV 01 2016

MISS. PUBLIC SERVICE  
COMMISSION  
PUBLIC UTILITIES STAFF

**16-UN-0183**

Issue Date: September 15, 2016

Effective Date: November 1, 2016

Issued By: Donna F. Alexander, Executive Vice President  
Post Office Box 922  
Bay Springs, MS 39422



LECTED FOR PUBLIC INSPECTION

# Lifeline Assistance Program

## Application and Certification Form

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Last Four Digits of Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: MS Zip: \_\_\_\_\_

My Physical Address is: ☐ Permanent ☐ Temporary ☐ Multi-Household

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone number for which Lifeline credits are to apply: \_\_\_\_\_

### = NOTICE =

Lifeline is a federal benefit; only one Lifeline service is available per household; a household cannot receive benefits from multiple providers such as wireline and wireless; a household is defined for Lifeline eligibility as any individual or group of individuals who live together at the same address and share their income and expenses (economic unit); and Lifeline is a non-transferable benefit. Violation of the one per household rule requirement would constitute a violation of the Federal Communications Commission's rules and would result in the consumer's de-enrollment from the program, and potentially, prosecution by the United States government.

Are you or any member of your household currently receiving a Lifeline benefit from any service provider?

☐ YES ☐ NO If yes, be aware that only one Lifeline benefit is allowed per household.

### = PROGRAM-BASED ELIGIBILITY CRITERIA =

\_\_\_\_\_ (Initial required) I certify that either my household or I participate in the following assistance program(s).  
I will provide documentation of my participation in programs to Bruce Telephone Company.

(Check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Supplemental Nutrition Assistance Program (SNAP) | <input type="checkbox"/> Medicaid                           |
| <input type="checkbox"/> Federal Public Housing Assistance - Sect 8       | <input type="checkbox"/> Supplemental Security Income (SSI) |
| <input type="checkbox"/> Veterans Pension or Survivors Pension            |   |

### = INCOME-BASED ELIGIBILITY =

To qualify for income eligibility, you must provide copies of one or more of the documents listed below:

Prior year's state or federal tax return; Social Security benefits statement; Veterans Administration benefits statement; retirement/pension benefit statement; divorce decree or child support document; Unemployment/Workers Compensation benefits statement; or current income statement from employer or paycheck stub, or other official document containing income information. If you provide documentation that does not cover a full year (such as a pay stub), you must submit three (3) consecutive months of the same type of document within the current calendar year.

How many people are in your household? \_\_\_\_\_ What is the yearly total household income? \_\_\_\_\_

\_\_\_\_\_ (Initial if applicable) My total household income is at or below 135% of the Federal Poverty Guidelines.  
(See Federal Poverty Guidelines on Page 2)



NOTED FOR PUBLIC INSPECTION

# Lifeline Assistance Program

## Application and Certification Form

**I certify under penalty of perjury the following (initial by each certification):**

- \_\_\_\_\_ *I meet the program-based or the income-based eligibility criteria for receiving Lifeline.*
- \_\_\_\_\_ *I will notify Bruce Telephone Company (BTC) within 30 days if I*
- 1) cease to participate in a federal qualifying program or programs or if my annual household income exceeds 135% of the Federal Poverty Guidelines;*
  - 2) receive more than one Lifeline-supported service; or*
  - 3) for any other reason, no longer satisfy the criteria for receiving Lifeline support.*
- \_\_\_\_\_ *I certify and attest under penalty of perjury that I understand this notification requirement and I may be subject to penalties if I fail to follow this requirement.*
- \_\_\_\_\_ *If I move to a new address I will provide that new address to BTC within 30 days of moving.*
- \_\_\_\_\_ *If my address is temporary, I will verify my address with BTC every 90 days.*
- \_\_\_\_\_ *My household will receive only one Lifeline service and, to the best of my knowledge, my household is not already receiving a Lifeline benefit from any other service provider such as Safelink, Assurance, Access Wireless, or wireline provider.*
- \_\_\_\_\_ *The information I provided in this certification form is true and correct to the best of my knowledge.*
- \_\_\_\_\_ *I understand that willfully making false statements to obtain the Lifeline benefit can result in fines, imprisonment, de-enrollment, or being barred from the program.*
- \_\_\_\_\_ *I acknowledge that providing false or fraudulent information to receive the Lifeline benefit is punishable by law.*
- \_\_\_\_\_ *I acknowledge that I may be required to re-certify my continued eligibility for Lifeline at any time, and my failure to re-certify my continued eligibility will result in de-enrollment and termination of my Lifeline benefit.*

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Federal Poverty Guidelines for 2017

Persons in Family or Household	Yearly Household Income	Monthly Household Income	Weekly Household Income
1	\$16,281	\$1,357	\$313
2	\$21,924	\$1,827	\$422
3	\$27,567	\$2,297	\$530
4	\$33,210	\$2,768	\$639
5	\$38,853	\$3,238	\$747
6	\$44,496	\$3,708	\$856
7	\$50,139	\$4,178	\$964
8	\$55,782	\$4,649	\$1,073
For each additional person, add:	\$5,643	\$470	\$109

**Bruce Telephone Company, Inc. - SAC 280447**

**Response to Line 3010 – Milestone Certification (47 CFR §54.313(f)(1)(i))**

Bruce Telephone Company, Inc. - SAC 280447 hereby certifies that throughout 2016, it took reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas and that requests for such service are met within a reasonable amount of time. If a request for broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream is unreasonable, the Company offers broadband service at the highest available speed.

Calhoun County Probation Parole	111 E Main St, Pittsboro, MS 38951
Mississippi State Department of Health	107 E Main St, Pittsboro, MS 38951
Calhoun County of Department of Human Services and Economic As	235 S Murphree St, Pittsboro, MS 38951
Bruce Eye Clinic	208 W Calhoun St, Bruce, MS 38915
Bruce Vision Center	208 W Calhoun St, Bruce, MS 38915

**REDACTED – FOR PUBLIC INSPECTION**

**ATTACHMENT - LINE 3017**

**ATTACHMENT REDACTED IN ENTIRETY**